

National Stage Processing
Paralegal Specialist

(703) 305-3734

SERIAL NO. *10162424*

FILE NUMBER

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1						51
2							52
3							53
4	3						54
5							55
6							56
7							57
8	3						58
9							59
10	1						60
11							61
12							62
13							63
14							64
15							65
16							66
17							67
18							68
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37							87
38							88
39							89
40							90
41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
TOTAL IND.	3						TOTAL IND.
TOTAL DEP.	9	↔	↔	↔	↔		TOTAL DEP.
TOTAL CLAIMS	12	↔	↔	↔	↔		TOTAL CLAIMS